

CONFIDENTIAL

PRIVILEGED

## PERKINS COIE LLP- SEATTLE

FAX NUMBER: (206) 264-

*This fax number is to be used for communications on \_ only. After this date, please send to our central fax room: (206) 583-8500.*

IF THERE ARE PROBLEMS WITH THIS TRANSMISSION, PLEASE CALL:

48<sup>TH</sup> FLOOR RECEPTION: (206) 264-6300RECEIVED  
CENTRAL FAX CENTER

MAR 01 2005

Addressee: U.S. Patent & Trademark Office FAX NO. (703) 872-9306  
(COMPANY)Examiner Nhon D. Nguyen Direct Dial \_\_\_\_\_  
(INDIVIDUAL)From: Maurice J. Piro Date March 1, 2005Cover Sheet & 8 pages Client Number 418268869USReturn to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
NAME EXT. CONFERENCE LOCATIONOriginal document(s) will be: ☐ sent to you ☐ held in our filesRE: U.S. Patent Application No. 09/773,451  
Navigational Interface for Mobile and Wearable  
Computers

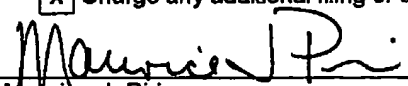
PLEASE DELIVER TO EXAMINER NHON D. NGUYEN, ART UNIT NO. 2179

Sent By \_\_\_\_\_

☐ Call Addressee to confirm they received this fax.

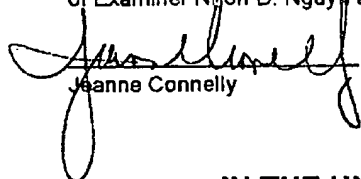
This Fax contains confidential, privileged information intended only for the intended addressee. Do not read, copy or disseminate it unless you are the intended addressee. If you have received this Fax in error, please call us (collect) immediately at (206) 583-8575, and mail the original Fax to Perkins Coie LLP, 1201 Third Avenue, Suite 4800, Seattle, WA 98101-3099.

[Document1]

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. - 418268869US		
Application No. 09/773,451-Conf. #8035		Filing Date January 31, 2001	Examiner N. D. Nguyen	Art Unit 2179	
Applicant(s): John SanGiovanni					
Invention: NAVIGATIONAL INTERFACE FOR MOBILE AND WEARABLE COMPUTERS					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	5	- 52 =	0	x	0
Independent Claims	3	- 5 =	0	x	0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>0.00</b>
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0665</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Maurice J. Pirio Attorney Reg. No.: 33,273			Dated: <u>March 1, 2005</u>		
PERKINS COIE LLP P.O. Box 1247 Seattle, Washington 98111-1247 (206) 359-8000					

Attorney Docket No. 41825899US

I hereby certify that this Amendment was faxed on the date indicated below to the U.S. Patent Office to the attention of Examiner Nhon D. Nguyen at 703-872.9306.

  
Jeanne Connelly

3/1/05  
March 1, 2005

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: JOHN SANGIOVANNI

APPLICATION NO.: 09/773,451

FILED: JANUARY 31, 2001

FOR: **NAVIGATIONAL INTERFACE FOR MOBILE  
AND WEARABLE COMPUTERS**

EXAMINER: NHON D. NGUYEN

ART UNIT: 2179

CONF. NO: 8035

RECEIVED  
CENTRAL FAX CENTER

MAR 01 2005

Amendment Under 37 C.F.R. § 1.111

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The present communication responds to the Office Action dated January 26, 2005 in the above-identified application. Please amend the application as follows:

Section	Page
Claim Amendments .....	2
Remarks .....	6